

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.H.		12/20/00
O.I.P.E. CLASSIFIER		48	12/26/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	KD	68472	

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	12/20/00
2	✓	✓	12/20/00
3	✓	✓	12/20/00
4	✓	✓	12/20/00
5	✓	✓	12/20/00
6	✓	✓	12/20/00
7	✓	✓	12/20/00
8	✓	✓	12/20/00
9	✓	✓	12/20/00
10	✓	✓	12/20/00
11	✓	✓	12/20/00
12	✓	✓	12/20/00
13	✓	✓	12/20/00
14	✓	✓	12/20/00
15	✓	✓	12/20/00
16	✓	✓	12/20/00
17	✓	✓	12/20/00
18	✓	✓	12/20/00
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25	✓	✓	12/20/00
26	✓	✓	12/20/00
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28	✓	✓	12/20/00
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30	✓	✓	12/20/00
31	✓	✓	12/20/00
32	✓	✓	12/20/00
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46	✓	✓	12/20/00
47	✓	✓	12/20/00
48	✓	✓	12/20/00
49	✓	✓	12/20/00
50	✓	✓	12/20/00

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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